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CONFIRMATION NO. 9503

<b>SERIAL NUMBER</b> 10/527,140	<b>FILING or 371(c) DATE</b> 10/19/2005 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> SHIG CPTA1402AU		
<b>APPLICANTS</b> Toshiyuki Hayase, Sendai-shi, JAPAN; Kenichi Funamoto, Sendai-shi, JAPAN; Atsushi Shirai, Sendai-shi, JAPAN; Tomoyuki Yambe, Sendai-shi, JAPAN; Yoshifumi Saijo, Sendai-shi, JAPAN;						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP03/12689 10/02/2003						
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2002-293631 10/07/2002						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 01/27/2006						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/JONATHAN CWERN/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> 2	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> HAYES SOLOWAY P.C. 3450 E. SUNRISE DRIVE, SUITE 140 TUCSON, AZ 85718 UNITED STATES						
<b>TITLE</b> Blood flow visualizing diagnostic apparatus						
<b>FILING FEE RECEIVED</b> 500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees		
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